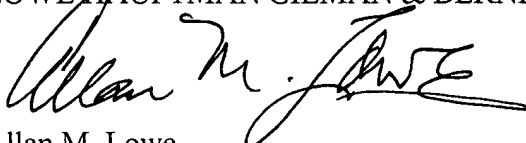


	NO. FILED		NO. EXTRA	RATE	AMOUNT
Total Claims	17	MINUS 20	0	x \$18 =	\$ 0.00
Independent Claims	2	MINUS 3	0	x \$ 80 =	\$ 0.00
If multiple dependent claims are presented, add \$ 260.00					\$ 0.00
Basic Fee					\$ 710.00
Total of above calculations					\$ 710.00
[] Assignment and Recording Fee					\$ 40.00
TOTAL FEE					\$ 750.00

- [] Please charge my Credit Card in the amount of \$.00. A Credit Card Payment Form (PTO-2038) is enclosed.
- [] Please charge my Deposit Account No. 07-1337 in the amount of \$0.00. A duplicate copy of this sheet is enclosed.
- [] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-1337.
- [] Any additional filing fees required under 37 CFR 1.16.
- [] The Commissioner is hereby authorized to charge payment of filing fees during the pendency of this application or credit any overpayment to Deposit Account No. 07-1337. A duplicate copy of this sheet is enclosed.
- [] Any patent application processing fees under 37 CFR 1.17.
- [] Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

LOWE HAUPTMAN GILMAN & BERNER, LLP



Allan M. Lowe

Registration No. 19,641

Date: February 21, 2001
1700 Diagonal Road, Suite 310
Alexandria, Virginia 22314
(703) 684-1111 AML:eb